 j	a	
<i>y-</i>		.*
	•	

$\frac{3}{2}$	UTILITY
	PATENT APPLICATION
=	TRANSMITTAL

Attorney Docket No.	00684.003550	
First Named Inventor or Application Identifier		
TAKEO SHOJI		
Express Mail Label No.		

(Only for new nonprovisional applications unde	r 37 CFR 1.53(b))	Express Mail	Label No			
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450			
Fee Transmittal Form (Submit an original, and a duplicate for fee page 2)	processing)	7.	CD-ROM or O	CD-R in duplicate,		
2. Applicant claims small entity status. See 37 CFR 1.27.		8.	Nucleotide an	nd/or Amino Acid S all necessary)	Sequence Submis	ssionO
3. X Specification Total Pa	ages 65			omputer Readable	Form (CRF)	U.S. F
4. X Drawing(s) (35 USC 113) Total Sh	neets 12		· —	ion Sequence Listi D-ROM or CD-R (10/7(
5. Oath or Declaration Total Pa				aper		+
a. Newly executed (original or co	opy)			atements verifying ANYING APPLIC	-	copies
b. Copy from a prior application (for continuation/divisional with		9.		apers (cover sheet &		
i. <u>DELETION OF IN</u> Signed Statement at	VENTOR(S) ttached deleting invento	or(s)	37 CFR 3.73(t (when there i	o) Statement s an assignee)	Power	of Attorney
named in the prior a 1.63(d)(2) and 1.33(pplication, see 37 CFR (b).	11.	English Trans	slation Document	(if applicable)	
6. X Application Data Sheet. See 37 CFR 1.	76	12. X	Information D Statement (ID	isclosure DS)/PTO-1449	X Copie	s of IDS ons
		13.	Preliminary A	mendment		
•		14. X		pt Postcard (MPE pe <i>cifically itemi</i> zed		
		15.		y of Priority Docur ority is claimed)	nent(s)	
		16	Other:			
17. If a CONTINUING APPLICATION, check app	propriate box and sup	ply the requisite in	formation:	.	,	· •
Continuation Divisional Prior application information:	Continuation	n-in-part (CIP)	of prior applic Group/Art Unit	ation No/ ::	<u>.</u>	
For CONTINUATION OR DIVISIONAL APPS only: Th considered a part of the disclosure of the accompanyin relied upon when a portion has been inadvertently omit	g continuation or division	onal application and	rom which an oa is hereby incorp	th or declaration is sometime or declaration is sometime.	supplied under Bo . The incorporatio	ox 5b, is on <u>can only</u> be
		PONDENCE ADD	RESS			
X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below						
NAME						
Address						
City	State		1	Zin Code		
Country	Telephone	•		Zip Code Fax		

			+
•)	.;	(1))

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RA	ATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	17-20 =	0	X \$ 18.00	=	\$0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	4-3 =	1	X \$ 86.00	=	\$86.00
	MULTIPLE DEPENDENT	T CLAIMS (if applicable) (37	CFR 1.16(d))	\$290.00	=	\$0.00
					SIC FEE FR 1.16(a))	\$770.00
	· -		Total of	above Calcu	ılations =	\$856.00
	Reduction by	50% for filing by small er	tity (Note 37 CFR 1.9,	1.27, 1.28).		
				0.00	TOTAL =	\$856.00
9. Sr a.	<u></u>	ntity statement is enclose				
a. b. c.	A small er A small er and desire	ntity statement was filed	in the prior nonprovisior		on and su	ch status is still propei
a. b. c.	A small er A small er and desire Is no long X A check in the amo	ntity statement was filed led. er claimed.	in the prior nonprovision	closed.	on and su	ch status is still propei
a. b. c. 0.	A small er A small er and desire Is no long X A check in the amo	ntity statement was filed ed. er claimed. ount of \$ 856.00 to count of \$	in the prior nonprovision cover the filing fee is end cover the recordal fee is	closed.		
a. b. c. 0.	A small en A small en and desire Is no long X A check in the amo A check in the amo the Commissioner is hereb 0. 06-1205:	ntity statement was filed ed. er claimed. ount of \$ 856.00 to count of \$	in the prior nonprovision cover the filing fee is end cover the recordal fee is	closed.		
a. b. c. 0 1 2. Th	A small en A small en A small en and desire Is no long X A check in the amount A check in the amount Commissioner is hereb Commissioner is hereb A check in the amount B Commissioner is hereb Commissioner is hereb Commissioner is hereb	ntity statement was filed ed. er claimed. ount of \$_856.00 to count of \$to	in the prior nonprovision cover the filing fee is end cover the recordal fee is	closed.		

	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED
NAME	Gary M. Jacobs (Reg. No. 28,861
SIGNATURE	Jary Jacoll
DATE	November 7, 2003

GMJ/kkv

DC_MAIN 149407v1